

MEDICAID CODING GUIDELINE
Effective for date of service 9/1/04 and after
Revised 1/1/05; 1/1/07

Immunization Administration for Vaccines/Toxoids

CPT CODE(S): **90465-90474** (See current CPT® for code descriptors)

Indications for use: Report/bill **90465-90474** in addition to the Vaccines, Toxoids (90476-90749).

CRITERIA: 90465-90468 must be reported/billed only when the provider renders and documents face-to-face counseling to the patient's (younger than 8 years of age) parent/guardian during the administration of any vaccine.

OR

90471-90474 must be reported/billed when the administration of any vaccine is not accompanied by face-to-face provider counseling to the patient and/or parent/guardian.

NOTE: To report/bill the immunization administration of a vaccine/toxoid, the vaccine/toxoid product code(s) (90476-90749) **MUST** be reported/billed in addition to the immunization administration code(s) 90465 – 90474.

IMPORTANT: Effective September 1, 2004 - When ND Medicaid is the secondary payer, the provider must submit the claim according to ND Medicaid guidelines; therefore it is acceptable for providers to change/add the appropriate CPT code(s) on the claim (i.e. 90465-90474).

COVERED DIAGNOSIS: **V03.__ - V06.9 -** Need for prophylactic vaccination and inoculation against, *_(specify disease[es])_* . See current edition of ICD-9-CM for accurate code(s).

CODING/BILLING: **90476 – 90749** Identifies the **Vaccine/Toxoid product only.**
(See current CPT® for code descriptors)
NOTE: ND Medicaid may not allow/reimburse all vaccines/toxoids in this code range. If the vaccine/toxoid is not allowed/reimbursed the immunization administration will not be allowed/reimbursed.

OR

90476 – 90749 - SL (state supplied) - **\$0.00**

When the vaccine/toxoid product is supplied by NDDoH, you must append the vaccine/toxoid product code(s) with modifier **SL**.

AND

90465 - 90474 The appropriate **Immunization Administration code(s) and charge(s) must be billed with Vaccine/Toxoid product code(s).**